



CANDIDATE COMMITTEE  
COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 5-3-12 to 7-22-12

1. Committee I.D. Number

150459

2. Committee Name

PATRICK O. DUGGAN  
FOR PROSECUTOR

4. Candidate Last Name

DUGGAN

First Name

PATRICK

M.I.

O.

4a. Office Sought Including District # or Community Served (If applicable)

BAY COUNTY PROSECUTING ATTORNEY

4b. County of Residence

BAY

5. Committee's Mailing Address

P.O. BOX 203  
KAWKAWLIN, MI 48631

Area Code and Phone (989) 780-1646

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address

DEBRA G. DUGGAN  
310 LINCOLN DR.  
BAY CITY, MI 48706

Area Code & Phone

(989) 780-1645

7. Treasurer's Business Address

CRAMER JR. HIGH  
313 PINE ST  
ESSEXVILLE, MI  
48732

Area Code and Phone (989) 460 2328

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

9. TYPE OF STATEMENT

9a. ☒ Pre-Election

OR

9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

AUGUST 7, 2012

9c. ☒ Annual Statement (2012 Coverage Year)

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c, or 9e to indicate which Statement is being amended)

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

DEBRA G. DUGGAN

Type or Print Name

Debra G. Duggan

Signature

Date

7-26-12

Candidate

PATRICK O. DUGGAN

Type or Print Name

Patrick O. Duggan

Signature

Date

7-26-12



**SUMMARY PAGE  
CANDIDATE COMMITTEE**

1. Committee I.D. Number

150459

2. Committee Name

PATRICK O. DUBGAN FOR PROSECUTOR

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	16,405.04	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	16,405.04	(18.) \$ 16,405.04
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	- 0 -	(19.) \$ - 0 -
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	16,405.04	(20.) \$ 16,405.04
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	274.91	(21.) \$ 274.91
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	- 0 -	(22.) \$ - 0 -
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	7,408.01	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	- 0 -	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	- 0 -	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	7,408.01	(23.) \$ 7,408.01
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	- 0 -	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	- 0 -	(24.) \$ - 0 -
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	3,136.04	
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	100	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	16,405.04	
	(15.) = \$	16,505.04	
15. SUBTOTAL Add lines 13 and 14			
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	7,408.01	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	9,097.03	



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name PATRICK O. DUGGAN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5-30-12</u>	
Name & Address: <u>PATRICK O. DUGGAN</u> <u>310 LINCOLN DR.</u> <u>BAY CITY, MI 48706</u>		\$ <u>800</u>	\$ <u>800</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASST. PROS.</u> Employer <u>SAGINAW COUNTY</u> Business Address <u>111 S. MICHIGAN, SAG. MI 48602</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5-31-12</u>	
Name & Address: <u>JAMES M. HAMMOND</u> <u>420 CHEM. BANK BLDG.</u> <u>BAY CITY, MI 48708</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>ABOVE</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5-3-12</u>	
Name & Address: <u>PATRICK O. DUGGAN (SEE ABOVE)</u>		\$ <u>100</u>	\$ <u>900</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASST. PROS.</u> Employer <u>SAGINAW COUNTY</u> Business Address <u>(SEE ABOVE)</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-10-12</u>	
Name & Address: <u>PATRICK O. DUGGAN (SEE ABOVE)</u>		\$ <u>500</u>	\$ <u>1400</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASST. PROS.</u> Employer <u>SAGINAW COUNTY</u> Business Address <u>(SEE ABOVE)</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1,500.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS

SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 6-14-12

Name & Address:

PATRICK D. DUGGAN  
310 LINCOLN DR  
BAY CITY, MI 48706

\$ 325 \$ 1,725

5. If over \$100.00 cumulative, please provide:

Occupation ASST. PROJ.

Employer SAGINAW COUNTY

Click Here for Memo Itemization

Business Address 111 S. MICHIGAN, SAGINAW, MI 48602

Type of Contribution:

☐ Direct

☒ Loan from a person

☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 6-20-12

Name & Address:

PATRICK D. DUGGAN [SEE ABOVE]

\$ 300 \$ 2,025

5. If over \$100.00 cumulative, please provide:

Occupation ASST. PROJ.

Employer SAGINAW COUNTY

Click Here for Memo Itemization

Business Address [SEE ABOVE]

Type of Contribution:

☐ Direct

☒ Loan from a person

☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 6-22-12

Name & Address:

JODY MEAGHER  
3873 UTAH  
BAY CITY, MI 48706

\$ 815 \$ 815

5. If over \$100.00 cumulative, please provide:

Occupation PERSONNEL OFFIC

Employer GM POWERTRAIN

Click Here for Memo Itemization

Business Address 1001 WOODSIDE, BAY CITY, MI 48708

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt 6-13-12

Name & Address:

ABEL B. TORRES  
2307 GYSIN CT.  
BAY CITY, MI 48708

\$ 100 \$ 100

5. If over \$100.00 cumulative, please provide:

Occupation ATTY - RET'D

Employer \_\_\_\_\_

Click Here for Memo Itemization

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

1,540.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150 459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>GENA AMDS</u> <u>1820 AMHEARST</u> <u>SAGINAW, MI 48602</u>		\$ <u>25</u>	\$ <u>25</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>GUY GREVE</u> <u>2300 NURMI DR.</u> <u>BAY CITY, MI 48708</u>		\$ <u>25</u>	\$ <u>25</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>JAMES M. HAMMOND</u> <u>420 CHEM. BANK</u> <u>BAY CITY, MI 48708</u>		\$ <u>100</u>	\$ <u>200</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer _____		Click Here for Memo Itemization	
Business Address <u>ABOVE</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>SUSAN KALTENBACH</u> <u>12 E. HANNUM BLVD.</u> <u>SAGINAW, MI 48602</u>		\$ <u>25</u>	\$ <u>25</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 175.00

Grand Total of All Schedules 1A  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

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6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

KYLE HIGGS TARRANT  
111 S. MICHIGAN  
SAGINAW, MI 48602

\$ 100 \$ 100

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

DEMOND TIBBS  
2213 COURT ST  
SAGINAW, MI 48602

\$ 25 \$ 25

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

GEORGE BEST  
17101 BURT  
BRANT, MI 48614

\$ 100 \$ 100

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

JANET BOES  
4582 WALL ST  
SAGINAW, MI 48638

\$ 35 \$ 35

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 260.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>JAMES BORCHARD</u> <u>111 S. MICHIGAN</u> <u>SAGINAW, MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>JOSEPH LUPLOW</u> <u>314 N. MICHIGAN</u> <u>SAGINAW, MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>KATHLEEN MAINE</u> <u>817 W. REMINGTON</u> <u>SAGINAW, MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>GEORGE BUSH</u> <u>723 WILLIAMS</u> <u>SAGINAW, MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 225.00

Grand Total of All Schedules 1A  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>A. LEE STURTZ</u> <u>608 S. MICHIGAN</u> <u>SAGINAW, MI 48602</u>		\$ <u>50</u>	\$ <u>50</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTY</u> Employer _____		Click Here for Memo Itemization	
Business Address <u>ABOVE</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>AMBER DAVIS JOHNSON</u> <u>1353 N. JONES RD.</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>100</u>	\$ <u>100</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTY</u> Employer <u>SELF</u>		Click Here for Memo Itemization	
Business Address <u>6420 NORMANDY, SAGINAW, MI</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>LORI BOMMARITO</u> <u>9245 KOCHVILLE RD</u> <u>FREELAND, MI 48623</u>		\$ <u>50</u>	\$ <u>50</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>TRISH REHMANN</u> <u>4572 CEDAR CREST DR</u> <u>SAGINAW, MI 48603</u>		\$ <u>25</u>	\$ <u>25</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 225.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>ROBERT DUNN</u> <u>701 WILSON DR</u> <u>MIDLAND, MI</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>KIM HIGGS</u> <u>3110 HIDDEN RD</u> <u>BAY CITY, MI 48706</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTY</u> Employer <u>SELF</u>		Click Here for Memo Itemization	
Business Address <u>1001 CENTER, BAY CITY, MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>STEVE JACOBS</u> <u>743 N. KNIGHT</u> <u>BAY CITY, MI 48708</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>JANE QUINN</u> <u>201 LAGDON BCH</u> <u>BAY CITY, MI 48706</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 200.00

Grand Total of All Schedules 1A  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>KATE MILLER</u> <u>6816 HEATHERIDGE</u> <u>SAGINAW, MI 48603</u>		\$ <u>50</u>	\$ <u>50</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: _____		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>RODNEY O'FARRELL</u> <u>2778 N. RIVER RD</u> <u>SAGINAW, MI 48603</u>		\$ <u>100</u>	\$ <u>100</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: _____		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>MICHAEL KANUSZEWSKI</u> <u>3553 E. KENT RD.</u> <u>FREELAND, MI 48623</u>		\$ <u>35</u>	\$ <u>35</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: _____		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>JON SAHLI</u> <u>1624 BECKLEY RD.</u> <u>BATTLE CK, MI 49015</u>		\$ <u>50</u>	\$ <u>50</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: _____		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 235.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150 459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

M. RANDALL JURENS  
2012 HARRY ST.  
SAGINAW, MI 48602

\$ 25

\$ 25

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

RICHARD KING  
11568 SADDLEBROOK CIR.  
FREELAND, MI 48623

\$ 100

\$ 100

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation ASST. PROS. Employer SAGINAW COUNTY

Business Address 111 S. MICHIGAN, SAGINAW, MI 48602

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

JOSEPH ALBOSTA  
3735 GLEANER RD.  
SAGINAW, MI 48609

\$ 25

\$ 25

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:

STEVE SEMAN  
1002 S. MICHIGAN  
SAGINAW, MI 48602

\$ 25

\$ 25

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

175.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>WILLIAM DARBEE</u> <u>510 N. JOHNSON</u> <u>BAY CITY, MI 48708</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>MATT DAMBRD</u> <u>1420 W. MIDLAND RD</u> <u>AUBURN, MI 48611</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>LYNN RIVARD</u> <u>840 N. GARFIELD</u> <u>LINWOOD, MI 48631</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>SUSAN F. GLAZA</u> <u>1314 SCHEURMANN</u> <u>ESSEX VILLE, MI 48732</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

175.00  
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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:  
CYNTHIA LUCZAK  
808 FROST DR  
BAY CITY MI 48706

\$ 100 \$ 100

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation COUNTY CLERK Employer BAY COUNTY

Business Address 515 CENTER, BAY CITY, MI 48708

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:  
JOHN McCOLGAN  
827 N. MICHIGAN  
SAGINAW, MI 48602

\$ 25 \$ 25

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:  
SUSIE McCOLGAN  
827 N. MICHIGAN  
SAGINAW, MI 48602

\$ 25 \$ 25

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 6-13-12

Name & Address:  
RENEE MROZINSKI  
3061 W. BIRCH  
BAY CITY, MI 48706

\$ 25 \$ 25

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 175.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>KIM FORGASH</u> <u>4585 GREENFIELD</u> <u>BAY CITY, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>JEFF FORGASH</u> <u>4585 GREENFIELD</u> <u>BAY CITY, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>PHILIP A STURTZ</u> <u>12 W. COURT</u> <u>SAGINAW, MI 48638</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>PHILIP R. STURTZ</u> <u>608 S. MICHIGAN</u> <u>SAGINAW, MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 300.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-13-12</u>	
Name & Address: <u>ROBERT LEE</u> <u>P.O. BOX 531</u> <u>BAY CITY, MI 48707</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-13-12</u>	
Name & Address: <u>MIKE RIVARD</u> <u>840 N. GARFIELD</u> <u>LINWOOD, MI 48631</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-13-12</u>	
Name & Address: <u>RICHARD SHEPARD</u> <u>703 N. WASHINGTON</u> <u>BAY CITY, MI 48708</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-13-12</u>	
Name & Address: <u>MARY PENZIEN</u> <u>401 JOHN K. DR</u> <u>AUBURN, MI 48611</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 145.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>BARB KRZYZANIAK</u> <u>3707 PRAIRIE CK LN</u> <u>SAGINAW, MI 48603</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer _____ Business Address <u>N/A</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>BRUCE GOETZ</u> <u>116 S. MICHIGAN</u> <u>SAGINAW, MI 48602</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>KEN NELSON, DDS</u> <u>P.O. BOX 1064</u> <u>BAY CITY, MI 48706</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>ART DORE</u> <u>P.O. BOX 146</u> <u>BAY CITY, MI 48702</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

375.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.

50459

unt	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization	
<u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization	
<u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization	
<u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization	

5.00

is total on  
of Summary





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>JODY MEAGHER</u> <u>3873 UTAH DR</u> <u>BAY CITY, MI 48706</u>		\$ <u>185</u>	\$ <u>1,000</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>PERSONNEL OFFIC</u> Employer <u>GM POWERTRAIN</u> Click Here for Memo Itemization			
Business Address <u>1001 WOODSIDE, BAY CITY, MI 48708</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>BARBARA LACASSE METER</u> <u>3323 FOSS DR</u> <u>SAGINAW, MI 48803</u>		\$ <u>100</u>	\$ <u>100</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>DONALD CLINE</u> <u>6215 FOX GLEN APT. 303</u> <u>SAGINAW, MI 48638</u>		\$ <u>50</u>	\$ <u>50</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>LYNDA HEATHSCOTT</u> <u>111 S. MICHIGAN</u> <u>SAGINAW, MI 48602</u>		\$ <u>100</u>	\$ <u>100</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 435.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150 459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>TERRY MANWELL</u> <u>3891 CHIPPING NORTON CT.</u> <u>SABINAW, MI 48603</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>JOSEPH S. SCORSONE</u> <u>827 N. MICHIGAN</u> <u>SABINAW, MI 48602</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>MICHAEL SOVANSKY</u> <u>2475 MIDLAND RD</u> <u>SABINAW, MI 48603</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-12</u> Name & Address: <u>WENDY TALLY</u> <u>2215 MCKINLEY</u> <u>BAY CITY, MI 48704</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 275.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>GUILLERMO HERRERA</u> <u>1403 DEAN ST</u> <u>BAY CITY, MI 48706</u>		\$ <u>50</u>	\$ <u>50</u>
4. Date of Receipt <u>6-13-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>ASHLEY CLEMENTS</u> <u>3950 WHEELER</u> <u>BAY CITY, MI 48706</u>		\$ <u>100</u>	\$ <u>100</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>CONTRACTOR</u> Employer <u>SELF</u>		Click Here for Memo Itemization	
Business Address <u>SAME AS ABOVE</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>LAURA BURKE</u> <u>3050 HIDDEN RD.</u> <u>BAY CITY, MI 48706</u>		\$ <u>200</u>	\$ <u>200</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>N/A</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>LARRY AUGUSTYNIAK</u> <u>1630 E. PINCONNING RD</u> <u>PINCONNING, MI 48650</u>		\$ <u>500</u>	\$ <u>500</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>FARMER</u> Employer <u>SELF</u>		Click Here for Memo Itemization	
Business Address <u>ABOVE</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 850.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>CHAD CNUDDER</u> <u>3333 BRENTWAY DR.</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	<u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>CHRISTOPHER SHORT</u> <u>4248 WINTERWOOD LN.</u> <u>SAGINAW, MI 48603</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>100</u>	<u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>JAMES YOUNG</u> <u>P.O. BOX 38</u> <u>CARSONVILLE, MI 48419</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>100</u>	<u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>BRUCE PETRICK</u> <u>609 S. WARREN</u> <u>SAGINAW, MI 48601</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>50</u>	<u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

280.00  
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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>MARY ELLEN GOOD</u> <u>2809 MILLS RD.</u> <u>PRESCOTT, MI 48756</u>		\$ <u>100</u>	\$ <u>100</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>NEWTON JEROME</u> <u>4117 STERLING RD</u> <u>DMER, MI 48749</u>		\$ <u>100</u>	\$ <u>100</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>RICHARD ALGER</u> <u>3157 WARNER RD</u> <u>SAGINAW, MI 48602</u>		\$ <u>50</u>	\$ <u>50</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>JAMES ROWLEY</u> <u>5304 BROOKWAY</u> <u>BAY CITY, MI 48706</u>		\$ <u>50</u>	\$ <u>50</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 300.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-16-12</u> Name & Address: <u>MARY VOSLER</u> <u>1508 5th</u> <u>BAY CITY, MI 48708</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DEAN VOSLER</u> <u>1508 5th</u> <u>BAY CITY, MI 48708</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>RICHARD KING</u> <u>11568 SADDLE BROOK</u> <u>FREELAND, MI</u>		\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASST. PROS</u> Employer <u>SAGINAW COUNTY</u> Business Address <u>111 S MICHIGAN, SAGINAW, MI 48602</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JASON TUNNEY</u> <u>5675 GATE DR</u> <u>SAGINAW, MI 48603</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

250.00  
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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>PAMELA TUNNEY</u> <u>5675 GATE DR</u> <u>SAGINAW, MI 48603</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>SHERRY VAN HORN</u> <u>2475 S. ROSCOMMON</u> <u>PRUDEN VILLE, MI 48651</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>KATHY BACH</u> <u>275 OAKDALE</u> <u>BAY CITY, MI 48706</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JOSEPH PURTELL</u> <u>P.O. BOX 157</u> <u>BAY CITY, MI 48707</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer _____ Business Address <u>900 CENTER, BAY CITY, MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 400.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>DAVE KELLY</u> <u>4039 ALLEN CT</u> <u>BAY CITY, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>MICHAEL DUGGAN</u> <u>1555 N. HOYNE AVE</u> <u>CHICAGO, ILL 60602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>MICHAEL T. DUGGAN</u> <u>1605 E. CENTRAL RD, UNIT #1</u> <u>ARLINGTON, ILL 60005</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>MARGARET FORGASH</u> <u>310 LINCOLN DR</u> <u>BAY CITY, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>57</u>	\$ <u>57</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

257.00  
Enter this total on  
line 3a of Summary  
Page.





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>TOM DEPREKEL</u> <u>305 STARK ST</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>721 WASHINGTON ST, BAY CITY, MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>DON FRITZ</u> <u>P.O. BOX 746</u> <u>WEST BRANCH, MI 48661</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>CHARLES COLEMAN</u> <u>612 FEDERAL</u> <u>SAGINAW, MI 48601</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>BILL DORE</u> <u>2229 DEBRA</u> <u>KAWKAWLIN, MI 48631</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

195.00  
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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>ABEL TORRES</u> <u>2307 GYSIN CT.</u> <u>BAY CITY, MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTY-RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>405</u>	\$ <u>505</u>
3. Contribution #2 Name & Address: <u>JAN KWATER</u> <u>6787 FORD RD</u> <u>BIRCH RUN, MI 48415</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>15</u>	\$ <u>15</u>
3. Contribution #3 Name & Address: <u>BILL SMITH</u> <u>721 S. MICHIGAN</u> <u>SAGINAW, MI 48602</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
3. Contribution #4 Name & Address: <u>LORI BOMMARITO</u> <u>9245 KOCHVILLE RD.</u> <u>FREELAND, MI 48623</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>30</u>	\$ <u>80</u>

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

470.00  
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Enter this total on  
line 3a of Summary  
Page.

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>STEVE COFFEE</u> <u>6420 NORMANDY</u> <u>SAGINAW, MI 48638</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>SUE TARRANT</u> <u>6420 NORMANDY</u> <u>SAGINAW, MI 48638</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>SHELLEY SMITH</u> <u>6420 NORMANDY</u> <u>SAGINAW, MI 48638</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DDUG TAYLOR</u> <u>6420 NORMANDY</u> <u>SAGINAW, MI 48638</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

65.00  
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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DARRELL ZOLTON</u> <u>6420 NORMANDY</u> <u>SAGINAW, MI 48638</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>ESTELLE PRZBYLSKI</u> <u>1320 FROMM DR.</u> <u>SAGINAW, MI 48638</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>SARA RYAN</u> <u>679 SOMERSET</u> <u>SAGINAW, MI 48638</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>BARB KRZYZANIAK</u> <u>3707 PRAIRIE CK LN</u> <u>SAGINAW, MI 48603</u>		\$ <u>200</u>	\$ <u>400</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

275.00  
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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>SUE GLAZA</u> <u>1314 SCHEURMANN</u> <u>ESSEXVILLE, MI</u>		\$ <u>30</u>	\$ <u>80</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>KEITH BIRCHLER</u> <u>900 CENTER</u> <u>BAY CITY, MI 48705</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>BOB DUNN</u> <u>701 WILSON DR.</u> <u>MIDLAND, MI 48642</u>		\$ <u>30</u>	\$ <u>80</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JACK FROST</u> <u>309 MAIN ST</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

120.00  
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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>GUY GREVE</u> <u>2300 NURMI DR</u> <u>BAY CITY, MI 48708</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>40</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>STELLA PAYNE</u> <u>111 N. MICHIGAN</u> <u>SAGINAW, MI 48602</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>JAMES MINER</u> <u>1025 ROSEMARY LN</u> <u>ESSEXVILLE, MI 48732</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>24</u>	\$ <u>24</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>JAN MINER</u> <u>304 W. HAMPTON RD.</u> <u>ESSEXVILLE, MI</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>RUTH NOBLE</u> <u>315 N. POWELL</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JOE PERGANDE</u> <u>1565 PRIMROSE LN</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DAVID POWERS</u> <u>8615 S. LINWOOD BCH.</u> <u>LINWOOD, MI 48634</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>ERIC PROSCHEK</u> <u>2170 5th ST</u> <u>BAY CITY, MI 48708</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 90.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>JAMES HAMMOND</u> <u>602 HANDY</u> <u>BAY CITY, MI 48706</u>		\$ <u>30</u>	\$ <u>230</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u>		Click Here for Memo Itemization	
Business Address <u>420 CHEM. BANK BLDG, BAY CITY, MI 48708</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>JAN NOWAK</u> <u>1221 N. CHILSON</u> <u>BAY CITY, MI 48706</u>		\$ <u>39</u>	\$ <u>39</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>PAUL DANNES BERGER</u> <u>4852 DOREY DR</u> <u>BAY CITY, MI 48706</u>		\$ <u>24</u>	\$ <u>24</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>DAN SALOIS</u> <u>303 REVILLO</u> <u>BAY CITY, MI 48706</u>		\$ <u>25</u>	\$ <u>25</u>
4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 118.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>BRAD BACH</u> <u>1298 JODY LYNN LN</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JEFF KUICH</u> <u>2835 KAWKAWLIN RIV. DR.</u> <u>BAY CITY, MI 48706</u>		\$ <u>45</u>	\$ <u>45</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>ASHLEY CLEMENTS</u> <u>3950 WHEELER RD</u> <u>BAY CITY, MI 48706</u>		\$ <u>60</u>	\$ <u>160</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONTRACTOR</u> Employer <u>SELF</u> Business Address <u>SAME AS ABOVE</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>REGINALD MIERLAEN</u> <u>400 LINCOLN DR.</u> <u>BAY CITY, MI</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 165.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>CAROLE REINKE</u> <u>260 OAKDALE</u> <u>BAY CITY, MI 48700</u>		\$ <u>12</u>	\$ <u>12</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>JEANNE HEBNER</u> <u>3401 NOTTINGHAM</u> <u>BAY CITY, MI 48706</u>		\$ <u>24</u>	\$ <u>24</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>DICK HEBNER</u> <u>3401 NOTTINGHAM</u> <u>BAY CITY, MI 48706</u>		\$ <u>24</u>	\$ <u>24</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>TONY PAWELSKI</u> <u>226 LIBBY</u> <u>PINCONNING, MI 48650</u>		\$ <u>24</u>	\$ <u>24</u>
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 84.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>EDWIN SHIMABUKURO</u> <u>4538 GREENFIELD DR</u> <u>BAY CITY, MI 48706</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DONALD FELSKE</u> <u>1838 9th ST.</u> <u>BAY CITY, MI 48708</u>		\$ <u>24</u>	\$ <u>24</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>GLORIA WOODS</u> <u>354 KILLARNEY</u> <u>BAY CITY, MI 48706</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JEANNE Mc GAVIN</u> <u>1701 MCKINLEY</u> <u>BAY CITY, MI 48708</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 174.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
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Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>JOHN ROSZATYCKI</u> <u>3238 HIDDEN RD</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>MICHAEL NORGAN</u> <u>1111 ELM</u> <u>BAY CITY, MI 48708</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>JAMIE TEDDY</u> <u>1311 N. FRASER RD</u> <u>PINCONNING, MI 48650</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>PAM MONVILLE</u> <u>3346 GLENBROOK</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 90.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
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Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>JAMES WILLING</u> <u>191 NORTHVIEW DR.</u> <u>CAROL, MI 48673</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>60</u>	\$ <u>60</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>RANDY TUMKE</u> <u>2009 10th ST.</u> <u>BAY CITY, MI 48704</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>JEFF SHORKEY</u> <u>53 WHEELER</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>SHERY VAN HOUGHTEN</u> <u>2009 10th ST.</u> <u>BAY CITY, MI 48704</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 120.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>AL BILHIMER</u> <u>1003 BORTON</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIREE</u> Employer <u>N/A</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>SEAN WATERMAN</u> <u>5092 LOEBERRY</u> <u>SAGINAW, MI 48603</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>KEITH CHARBONNEAU</u> <u>3615 S. 7 MILE RD</u> <u>BAY CITY, MI 48706</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JEFF FORGASH</u> <u>4585 GREENFIELD</u> <u>BAY CITY, MI 48706</u>		\$ <u>45</u>	\$ <u>95</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 325.00  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule) —

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>DEMOND TIBBS</u> <u>2213 COURT</u> <u>SABINAW, MI 48602</u>		\$ <u>30</u>	\$ <u>55</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>SALLY WITUCKI</u> <u>1281 E. NO. UNION</u> <u>BAY CITY, MI 48706</u>		\$ <u>48</u>	\$ <u>48</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>LINDA VANTOL</u> <u>1205 W. NEBOBISH</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>DONALD GIRARDOT</u> <u>2958 FISCHER RD</u> <u>BAY CITY, MI 48706</u>		\$ <u>24</u>	\$ <u>24</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

282.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>SUE GANSSER</u> <u>1511 WOODMERE PL.</u> <u>BAY CITY, MI 48708</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>CYNTHIA LUZZAK</u> <u>808 FROST</u> <u>BAY CITY, MI 48706</u>		\$ <u>60</u>	\$ <u>160</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>STEVE FENNER</u> <u>3800 N. HARTFORD DR.</u> <u>SABINAW, MI 48603</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>LYNN RIVARD</u> <u>840 N. GARFIELD RD</u> <u>LINWOOD, MI 48611</u>		\$ <u>30</u>	\$ <u>55</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

145.00

Enter this total on  
line 3a of Summary  
Page.





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>RANDY PRICE</u> <u>5429 TEFT RD.</u> <u>ST. CHARLES, MI 48655</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>90</u>	\$ <u>90</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>RONALD GWIZDALA</u> <u>5244 CRESTWAY</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>ALMA WATTON</u> <u>505 GERMANIA</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>27</u>	\$ <u>27</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>BERNARD COPPOLINO</u> <u>111 N. MICHIGAN</u> <u>JABINAW, MI 48602</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 247.00  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>WALTER SAPPINGTON</u> <u>2930 HILL CREST</u> <u>WEST BRANCH, MI 48661</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DAVID GOLDEN</u> <u>P.O. BOX 26</u> <u>WEST BRANCH, MI 48661</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>MARIA LIAN</u> <u>4720 N. MICHIGAN</u> <u>SAGINAW, MI 48664</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>NEIL EVERSON</u> <u>202 S. RAYMOND</u> <u>BAY CITY, MI 48706</u>		\$ <u>24</u>	\$ <u>24</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 624.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>KIM HIGGS</u> <u>3110 HIDDEN RD</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	\$ <u>130</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>1001 CENTER, BAY CITY, MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>EDNA KAY SIMONS</u> <u>1509 3rd ST</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>JANICE FEINAUER</u> <u>5741 S. FRASER</u> <u>BAY CITY, MI 48706</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>ALAN REIMERS</u> <u>2755 E. DEXTER</u> <u>SABINAW, MI 48603</u>		4. Date of Receipt <u>7-18-12</u> \$ <u>60</u>	\$ <u>60</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 140.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>TOM MAJCHRZAK</u> <u>2150 SECOND ST</u> <u>BAY CITY, MI 48708</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>BRUCE CLARK</u> <u>604 MAIN</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>39</u>	\$ <u>39</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JUDD MORSE</u> <u>1230 WASHINGTON</u> <u>BAY CITY, MI 48708</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DENNIS SCHWARTZ</u> <u>48 KILLARNEY</u> <u>BAY CITY, MI 48706</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 129.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS

SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

JOHN MAY  
208 S. MANITOU  
PINCONNING, MI 48650

\$ 30

\$ 30

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

TERRY SPENCER  
208 S. MANITOU  
PINCONNING, MI 48650

\$ 30

\$ 30

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

TOM TOBER  
208 S. MANITOU  
PINCONNING, MI 48650

\$ 24

\$ 24

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

KEN NICKEL  
5953 RED FEATHER DR  
BAY CITY, MI 48706

\$ 24

\$ 24

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

108.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS

SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: KEVIN KRATZ 193 W. MUNGER RD. MUNGER, MI 48747		\$ 60	\$ 60
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: LARRY BINIECKI 304 S. HENRY BAY CITY, MI		\$ 15	\$ 15
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: MARILYN PRUITT 111 S. MICHIGAN SAGINAW, MI 48602		\$ 15	\$ 15
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: RANDY PFAU 1211 AMELITH BAY CITY, MI 48706		\$ 15	\$ 15
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

105.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>GLORIA BARTNIK</u> <u>111 S. MICHIGAN</u> <u>SAGINAW, MI 48612</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>CRYSTAL CULBERSON</u> <u>1014 CENTER</u> <u>BAY CITY, MI 48704</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>BARB MAUSOLF</u> <u>2006 NEWBERRY</u> <u>SAGINAW, MI 48602</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>NATHAN VANTIFFLIN</u> <u>608 S. DeWITT</u> <u>BAY CITY, MI 48706</u>		\$ <u>40</u>	\$ <u>40</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

79.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

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Enter this total on  
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Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>ANN NEUHAUS</u> <u>2344 DARWIN LN</u> <u>SAGINAW, MI 48603</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>RONNIE HEREK</u> <u>3088 W. BIRCH</u> <u>BAY CITY, MI 48706</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>STACY DAVIS</u> <u>345 S. 20th</u> <u>SAGINAW, MI 48601</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7-18-12</u> Name & Address: <u>BARBARA LAWSON</u> <u>5764 OLIVE TR, #B-6</u> <u>SAGINAW, MI 48603</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 67.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: WARREN ABBS 145 SALZBURG BAY CITY, MI 48706		\$ 24	\$ 24
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: LARRY REIMANN 803 FLORIDA CT BAY CITY, MI 48706		\$ 27	\$ 27
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: ELEANOR LIST 514 VENICE CT BAY CITY, MI 48708		\$ 12	\$ 12
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: BECKY REIMANN 803 FLORIDA CT BAY CITY, MI 48706		\$ 72	\$ 72
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

135.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>TOM GOODMAN</u> <u>4228 SHERRY CT.</u> <u>BAY CITY, MI 48706</u>		\$ <u>45</u>	\$ <u>45</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>GARY DOYEN</u> <u>10 DECENTER</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>RICK DRYZGA</u> <u>110 BOEHRINGER CT.</u> <u>BAY CITY, MI 48708</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>RITA BAKER</u> <u>1601 WOODMERE</u> <u>BAY CITY, MI 48708</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

102.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>ROBERT GEND</u> <u>6552 FRANKENLUST</u> <u>BAY CITY, MI 48706</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>JOE LA FRAM BOISE</u> <u>700 BRAUN</u> <u>AUBURN, MI 48611</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>JOY THOMPSON</u> <u>225 DEEN LN</u> <u>BAY CITY, MI 48706</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>MICHAEL BERGEN</u> <u>311 HART</u> <u>ESSEXVILLE, MI 48732</u>		\$ <u>24</u>	\$ <u>24</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

169.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: ROBT. LEE 1803 MICHIGAN BAY CITY, MI 48708		\$ 15	\$ 65
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: MARK BERGER 2235 CARROLL RD. BAY CITY, MI 48708		\$ 30	\$ 30
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: WAYNE LUTZE 2690 PEET RD NEW LOTHROP, MI 48060		\$ 15	\$ 15
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: JASON CAMPBELL 421 GLIDDEN RD BEAVERTON, MI 48612		\$ 15	\$ 15
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

75.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: TOM DEPREKEL 305 STARK ST BAY CITY, MI 48706		7-18-12	
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer SELF		\$ 15	\$ 115
Business Address 721 WASHINGTON, BAY CITY, MI 48708			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: JEN WIFE R SHEPARD 7706 WINDING CREEK CT. MIDLAND, MI 48642		7-18-12	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		\$ 60	\$ 60
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: PAM CROSS 111 S. MICHIGAN SAGINAW, MI 48602		7-18-12	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		\$ 15	\$ 15
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: ANGIE LARKIN 3270 BOWMAN BAY CITY, MI 48708		7-18-12	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		\$ 75	\$ 75
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

165.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt

7-18-12

Name & Address:

ROBERT RICKER  
1108 ANCHORWAY  
BAY CITY, MI 48706

\$ 24

\$ 24

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt

7-18-12

Name & Address:

AL EICHORN  
5412 EASY ST  
BAY CITY, MI 48706

\$ 12

\$ 12

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt

7-18-12

Name & Address:

NORMA FELKER  
177 S. LINCOLN RD  
BAY CITY, MI 48706

\$ 12

\$ 12

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt

7-18-12

Name & Address:

KEITH REINHART  
7261 KARA DR  
BAY CITY, MI 48706

\$ 15

\$ 15

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

63.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 7-18-12 Name & Address: HARRY RICE 7261 KARA DR BAY CITY, MI 48706		\$ 15	\$ 15
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 7-18-12 Name & Address: NANCY LEINBERGER 1326 <del>BOW</del> MICHIGAN RD. BAY CITY, MI 48706		\$ 12	\$ 12
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 7-18-12 Name & Address: GLORIA BYINGTON 2509 25th ST. BAY CITY, MI 48706		\$ 12	\$ 12
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 7-18-12 Name & Address: RUSS HOWELL 1 E. HANNUM SAGINAW, MI 48602		\$ 12	\$ 12
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

51.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DAVID BEARS</u> <u>54 SANDRA CT.</u> <u>SAGINAW, MI 48602</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>RICH MAILLETTE</u> <u>P.O. Box 24</u> <u>CARROLTON, MI, 48724</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>BERNIE HOGAN</u> <u>3966 RANCH DR</u> <u>BAY CITY, MI 48706</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>STEVE ROBBINS</u> <u>515 S. DEWITT</u> <u>BAY CITY, MI 48706</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

84.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

150459

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

ROY WALTON  
3444 ADAMS  
SAGINAW, MI 48602

\$ 20

\$ 20

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

MIKE ANDREOTTI  
111 S. MICHIGAN  
SAGINAW, MI 48602

\$ 15

\$ 15

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

KEN CHARBONNEAU  
408 GRANT ST  
AUBURN, MI 48611

\$ 15

\$ 15

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 7-18-12

Name & Address:

BRIAN CHARBOWNEAU  
3032 COVENTRY  
BAY CITY, MI 48706

\$ 30

\$ 30

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

80.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>ART INSH</u> <u>2365 E. N. UNION</u> <u>BAY CITY, MI 48706</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>W. J. MEAGHER</u> <u>3873 UTAH</u> <u>BAY CITY, MI 48706</u>		\$ <u>225</u>	\$ <u>225</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONTRACTOR</u> Employer <u>SELF</u> Business Address <u>SAME AS ABOVE</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>DON RAUSCHEN BERGER</u> <u>208 ROBERT</u> <u>AUBURN, MI 48611</u>		\$ <u>60</u>	\$ <u>60</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>JOSEPH PURTELL</u> <u>P.O. BOX 157</u> <u>BAY CITY, MI 48707</u>		\$ <u>30</u>	\$ <u>230</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>900 CENTER, BAY CITY, MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 345.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>BRIAN GRAVE</u> <u>4668 MAPLEWOOD</u> <u>BAY CITY, MI 48701</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>MICHAEL BLONDIN</u> <u>2099 E. N. BOUTELL RD</u> <u>LINWOOD, MI 48634</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>BONNIE SKORNIA</u> <u>9551 MIDLAND RD</u> <u>FREELAND, MI 48623</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>SCOTT RICHMOND</u> <u>10160 DIXIE</u> <u>BIRCH RUN, MI 48413</u>		\$ <u>45</u>	\$ <u>45</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 117.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>NELSON NIEDERER</u> <u>5402 ELM VIEW DR</u> <u>BAY CITY, MI 48706</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>GARRETT DEWYSE</u> <u>111 S. MICHIGAN</u> <u>SAGINAW, MI 48602</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>ROLAND PRICE</u> <u>1800 GARFIELD</u> <u>BAY CITY, MI 48704</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-18-12</u>	
Name & Address: <u>FRED FUNSTON</u> <u>1564 KINNEY CT</u> <u>ESSEXVILLE, MI</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 120.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

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Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>STEVE COOKLIN</u> <u>41 E. MUNGER RD</u> <u>MUNGER, MI 48747</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>MANNY TREVINO</u> <u>8350 GERA RD</u> <u>BIRCH RUN, MI 48415</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>CAROL HARRISON</u> <u>5833 CARTER RD.</u> <u>FREELAND, MI 48623</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>DAVE FILION</u> <u>111 S. MICHIGAN</u> <u>CABINAW, MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

87.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>JAMES KELLET</u> <u>1645 MAPLE RIDGE</u> <u>SAGINAW, MI 48604</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>PEGGY HALE</u> <u>2991 E. ERICKSON</u> <u>PINCONNING, MI 48650</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>RANDY WINTERS</u> <u>717 W. N. UNION</u> <u>AUBURN, MI 48611</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>39</u>	\$ <u>39</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>NEWTON JEROME</u> <u>4117 STERLING RD</u> <u>OMER, MI 48749</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>24</u>	\$ <u>124</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

125.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>LAURA BURKE</u> <u>3050 HIDDEN RD</u> <u>BAY CITY, MI 48706</u>		\$ <u>12</u>	\$ <u>212</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>KEN SMITH</u> <u>179 STATE PARK DR</u> <u>BAY CITY, MI 48706</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____    Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>STEPHEN KENT</u> <u>600 W. MIDLAND</u> <u>BAY CITY, MI 48706</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____    Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>GAIL KIPFMILLER</u> <u>5697 S. 8 MILE</u> <u>AUBURN, MI 48611</u>		\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____    Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 56.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>JEFF LALONDE</u> <u>1160 S. OUTER DR</u> <u>SAGINAW, MI 48601</u>		\$ <u>15</u>	\$ <u>15</u>
6. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DENNIS PROULX</u> <u>P.O. BOX 6272</u> <u>SAGINAW, MI 48608</u>		\$ <u>100</u>	\$ <u>100</u>
6. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>THOMAS HORISZNY</u> <u>1606 BRIARWOOD DR</u> <u>SAGINAW, MI 48638</u>		\$ <u>40</u>	\$ <u>40</u>
6. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u> Name & Address: <u>DARRIN NICHOLS</u> <u>1015 N. JOHNSON</u> <u>BAY CITY, MI 48708</u>		\$ <u>15</u>	\$ <u>15</u>
6. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 170.60

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.





ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150459

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>RICHARD MILSTER</u> <u>210 PENDLETON ST</u> <u>BAY CITY, MI 48708</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>PAUL FEHRMAN</u> <u>12021 BLOCK RD</u> <u>BIRCH RUN, MI 48415</u>		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SAGINAW COUNTY</u> Business Address <u>111 S. MICHIGAN, SAGINAW, MI 48602</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>KIP HUMPERT</u> <u>1645 MAPLERIDGE</u> <u>SAGINAW, MI 48604</u>		\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>7-18-12</u> Name & Address: <u>ALLEN RABIDEAU</u> <u>800 RAMBLING</u> <u>SAGINAW, MI 48601</u>		\$ <u>60</u>	\$ <u>60</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 255.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>ARLENE LEMIRE</u> <u>4640 FOX POINTE DR, # 231</u> <u>BAY CITY, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>12</u>	\$ <u>12</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>PATRICK D. DUBBAN</u> <u>310 LINCOLN DR.</u> <u>BAY CITY, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>1,111.04</u>	\$ <u>3,136.04</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASST. PROJ.</u> Employer <u>SAGINAW COUNTY</u> Business Address <u>111 S. MICHIGAN, SAGINAW, MI 48602</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>JIM PHILLIPS</u> <u>916 WASHINGTON AVE</u> <u>BAY CITY, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-18-12</u>	\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address:	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1,153.04  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule) 16,405.04

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 150459

CANDIDATE COMMITTEE

2. Committee Name PATRICK D. DUGGAN FOR PROSECUTOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>JASON LOWELL</u> <u>55 STATE PK. DR.</u> <u>BAY CITY, MI 48706</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: <u>SELF-EMPLOYED</u> <u>SAME AS ABOVE</u>	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>BOUNCE HOUSE</u> 5. Date Of Receipt: <u>7-18-12</u> 6. Vendor Name & Address: <u>N/A</u>	\$ <u>150</u>	\$ <u>150</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>BARB KRZYZANJAK</u> <u>3707 PRAIRIE CK LN</u> <u>SABINAW, MI 48603</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <u>RETIRED</u>	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>CAKES &amp; POTATO DISHES</u> 5. Date Of Receipt: <u>7-17-12</u> 6. Vendor Name & Address:	\$ <u>124.91</u>	\$ <u>524.91</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address:  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal 274.91

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)

274.91

Enter this total  
on line 6 of Summary  
Page

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150459  
2. Committee Name PATRICK O. DUGGAN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>USPS</u> Address <u>KAWIKAWLIN, MI</u> <u>48631</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>P.O. Box Rental</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-3-12</u> Date	\$ <u>20</u>
Expenditure #2 Name <u>BAY COUNTY DEM. PARTY</u> Address <u>P.O. Box 556</u> <u>PINCONNING 48650</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>SPRING FLING</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-3-12</u> Date	\$ <u>70</u>
Expenditure #3 Name <u>BAY COUNTY CLERK</u> Address <u>515 CENTER</u> <u>BAY CITY, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FILING FEE</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-3-12</u> Date	\$ <u>100</u>
Expenditure #4 Name <u>G'S PIZZERIA</u> Address <u>1005 SAGINAW</u> <u>BAY CITY, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>COMMITTEE MTG.</u> <u>FOOD CHARGES</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-30-12</u> Date	\$ <u>120.22</u>
Expenditure #5 Name <u>REIMOLD PRINTING</u> Address <u>3201 HALL MARK</u> <u>SAGINAW, MI 48603</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING &amp; MAILINGS</u> <u>FOR 6-13-12</u> <u>FUNDRAISER</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-31-12</u> Date	\$ <u>483.22</u>
Subtotal this page			<u>793.44</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>      </u>

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on line 8a of  
Summary Page

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150 459  
2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>US PS</u> Address <u>SAGINAW, MI 48603</u> <input checked="" type="checkbox"/> Fund Raiser	POSTAGE FOR <u>5-30-12</u> \$ <u>156.80</u> Purpose: <u>MAILING FOR 6-13-12</u> Date <u>FUNDRAISER</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name <u>BAY CITY TIMES</u> Address <u>MLIVE MEDIA GROUP</u> <u>5th STREET</u> <u>BAY CITY, MI 48704</u> <input checked="" type="checkbox"/> Fund Raiser	FINAL WORD <u>6-9-12</u> \$ <u>95</u> Purpose: <u>ADS FOR 6-13-12</u> Date <u>FUNDRAISER</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name <u>DIAMOND BALL ROOM</u> Address <u>605 E. MIDLAND</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	FOOD, DRINK AND ROOM RENTAL FOR <u>6-13-12</u> \$ <u>330.50</u> Purpose: <u>6-13-12 FUNDRAISER</u> Date Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name <u>SAM'S CLUB</u> Address <u>5656 BAY RD</u> <u>SAGINAW, MI 48603</u> <input checked="" type="checkbox"/> Fund Raiser	NAPKINS, CUTLERY, <u>6-13-12</u> \$ <u>43.65</u> Purpose: <u>PLATES FOR 6-13-12</u> Date <u>FUNDRAISER</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name <u>UAW 362 HALL</u> Address <u>4427 E. WILDER RD.</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	HALL RENTAL <u>6-14-12</u> \$ <u>125.00</u> Purpose: <u>HALL RENTAL</u> Date Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Subtotal this page		<u>750.95</u>	
Grand Total of all Schedules 1B (Complete on last page of Schedule)		<u>      </u>	

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on line 8a of  
Summary Page

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150459  
2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>BAY CITY TIMES</u> Address <u>FIFTH @ ADAMS</u> <u>BAY CITY, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FINAL WORD ADS</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-12-12</u> Date	\$ <u>114.00</u>
Expenditure #2 Name <u>MENARD'S</u> Address <u>2804 WILDER RD</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FUNDRAISER</u> <u>SUPPLIES, WRAP</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-12</u> Date	\$ <u>11.69</u>
Expenditure #3 Name <u>GREENE'S GAS</u> Address <u>2625 S. HURON RD.</u> <u>KAWKAWLIN, MI 48831</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>LP GAS FOR</u> <u>GRILLS</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-12</u> Date	\$ <u>29.75</u>
Expenditure #4 Name <u>GORDON'S</u> Address <u>3730 WILDER RD</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>CHEESE</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-12</u> Date	\$ <u>25.48</u>
Expenditure #5 Name <u>GORDON'S</u> Address <u>3730 WILDER RD</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FOOD, COOKING</u> <u>SUPPLIES</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-12</u> Date	\$ <u>41.64</u>
Subtotal this page			<u>222.56</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>                    </u>

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on line 8a of  
Summary Page

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150459  
2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>PARTY PALS</u> Address <u>50 SALZBURG RD.</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>HELIUM BALLOONS</u> <u>FOR CENTERPIECES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-12</u> Date Click Here for Memo Itemization Type	<u>\$ 25.44</u>
Expenditure #2 Name <u>SAM'S CLUB</u> Address <u>5656 BAY RD.</u> <u>SABINAW, MI 48603</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FOOD, PLATES,</u> <u>CUTLERY, NAPKINS,</u> <u>DRINKS, CANDY</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-14-12</u> Date Click Here for Memo Itemization Type	<u>\$ 350.02</u>
Expenditure #3 Name <u>GORDON'S</u> Address <u>3730 WILDER RD.</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>MEAT, SOUP,</u> <u>PLATES, BEANS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-17-12</u> Date Click Here for Memo Itemization Type	<u>\$ 89.49</u>
Expenditure #4 Name <u>TRISHA BACH</u> Address <u>1298 JODY LYNN LANE</u> <u>ESSEXVILLE, MI 48732</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>CHICKEN</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-17-12</u> Date Click Here for Memo Itemization Type	<u>\$ 400.00</u>
Expenditure #5 Name <u>SAM'S CLUB</u> Address <u>5656 BAY RD.</u> <u>SABINAW, MI 48603</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>DESSERTS,</u> <u>SALADS, SUPPLIES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-16-12</u> Date Click Here for Memo Itemization Type	<u>\$ 161.07</u>
Subtotal this page			<u>1,026.02</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>      </u>

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on line 8a of  
Summary Page

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150459  
2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name <u>WALMART</u> Address <u>3921 WILDER RD</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>CUPS, FOOD</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-12</u> Date	<u>\$ 27.88</u>
Expenditure #2 Name <u>GORDON'S</u> Address <u>3730 WILDER RD</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>VEGETABLES, TEA, TABLE SUPPLIES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-12</u> Date	<u>\$ 148.42</u>
Expenditure #3 Name <u>USPS</u> Address <u>KAWKAWLIN, MI 48631</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>POSTAGE FOR INVITATIONS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-2-12</u> Date	<u>\$ 180.00</u>
Expenditure #4 Name <u>WALMART</u> Address <u>3921 WILDER</u> <u>BAY CITY, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ENVELOPES &amp; PAPER FOR INVITATIONS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-1-12</u> Date	<u>\$ 10.57</u>
Expenditure #5 Name <u>GORDON'S</u> Address <u>3730 WILDER RD</u> <u>BAY CITY, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CANDY/PARADE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-16-12</u> Date	<u>\$ 10.98</u>

Subtotal this page 377.85  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) —

Enter this total  
on line 8a of  
Summary Page





ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150459  
2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>REIMOLD PRINTING</u> Address <u>3201 HALLMARK</u> <u>SABINAW, MI 48813</u> <input type="checkbox"/> Fund Raiser	<u>PRINTING OF</u> Purpose: <u>AV MAILERS</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-22-12</u> Date	<u>\$ 970.19</u>
Expenditure #2 Name <u>PHOENIX BUSINESS SOLUTIONS</u> Address <u>1309 MICHIGAN AVE</u> <u>BAY CITY, MI 48708</u> <input type="checkbox"/> Fund Raiser	<u>ADDRESS, POSTAL</u> Purpose: <u>AV MAILERS</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-24-12</u> Date	<u>\$ 431.00</u>
Expenditure #3 Name <u>FRIENDS OF B.C. ST. PARK</u> Address <u>C/O AL EICHORN</u> <u>5412 EASY ST</u> <u>BAY CITY, MI 48708</u> <input type="checkbox"/> Fund Raiser	<u>AD FOR WATER-</u> Purpose: <u>FOWL FESTIVAL</u> <u>NEWSPAPER</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-27-12</u> Date	<u>\$ 250.00</u>
Expenditure #4 Name <u>LA PIZZA</u> Address <u>704 W. MIDLAND</u> <u>AUBURN, MI 48611</u> <input type="checkbox"/> Fund Raiser	<u>COMM. MTG.</u> Purpose: <u>FOOD CHARGES</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-15-12</u> Date	<u>\$ 120.00</u>
Expenditure #5 Name <u>SHIRTS, MUGS, MORE</u> Address <u>2728 CENTER</u> <u>ESSEXVILLE, MI 48732</u> <input type="checkbox"/> Fund Raiser	<u>T-SHIRTS</u> Purpose: <u>T-SHIRTS</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-13-12</u> Date	<u>\$ 347.85</u>

Subtotal this page 2,119.04  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) —

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on line 8a of  
Summary Page

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150459  
2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>SAM'S CLUB</u> Address <u>5656 BAY RD</u> <u>SAGINAW, MI 48603</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CANDY FOR PARADES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-20-12</u> Date	\$ <u>25.44</u>
Expenditure #2 Name <u>LAMAR OUTDOOR ADVERTISING</u> Address <u>10100 THOR DRIVE</u> <u>FREELAND, MI 48623</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>BILLBOARD</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-22-12</u> Date	\$ <u>815.00</u>
Expenditure #3 Name <u>USPS</u> Address <u>SAGINAW, MI 48601</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>POSTAGE FOR AV MAILERS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-23-12</u> Date	\$ <u>1,007.21</u>
Expenditure #4 Name <u>BAY CITY FIREWORKS</u> Address <u>BAY CITY</u> <u>3296 E. FISHER</u> <u>BAY CITY, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DONATION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-24-12</u> Date	\$ <u>25.00</u>
Expenditure #5 Name <u>BAY COUNTY DEM. PARTY GOLF TOURNEY</u> Address <u>P.O. BOX 556</u> <u>PINCONNING, MI 48650</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>HOLE SPONSOR- SHIR FOR SIGN</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-26-12</u> Date	\$ <u>25.00</u>

Subtotal this page 1,898.15  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) —

Enter this total  
on line 8a of  
Summary Page

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150459  
2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>KATHLEEN KRATZ FOR</u> <u>TREASURER</u> Address <u>193 W. MUNGER RD</u> <u>MUNGER, MI 48747</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DONATION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-30-12</u> Date	<u>\$ 25.00</u>
Expenditure #2 Name <u>SUE KALTENBACH FOR</u> <u>COUNTY CLERK</u> Address <u>12 E. HANNUM</u> <u>SAGINAW, MI 48602</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DONATION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-9-12</u> Date	<u>\$ 25.00</u>
Expenditure #3 Name <u>PLACEMATS 4 YOU</u> Address <u>4910 GERA RD.</u> <u>FRANKENMUTA, MI</u> <u>48734</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADVERTISING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-10-12</u> Date	<u>\$ 150.00</u>
Expenditure #4 Name <u>BOBBY LEE FOR SHERIFF</u> Address <u>1803 MICHIGAN</u> <u>BAY CITY, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FUNDRAISER</u> <u>TICKETS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-19-12</u> Date	<u>\$ 20.00</u>
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Subtotal this page		<u>220.00</u>	
Grand Total of all Schedules 1B (Complete on last page of Schedule)		<u>7,408.01</u>	

Enter this total  
on line 8a of  
Summary Page

DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name PATRICK O. DUBGAN FOR PROSECUTOR

This Schedule itemizes:				
<input checked="" type="checkbox"/> Debts and obligations owed by or forgiven the committee OR <input type="checkbox"/> Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)				
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Owed to or by: <u>PATRICK O. DUBGAN</u> <u>310 LINCOLN DR.</u> <u>BAY CITY, MI 48706</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>5-30-12</u> 6. Original Amount of Debt: <u>\$ 800.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>800.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Owed to or by: <u>SAME AS ABOVE</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>5-3-12</u> 6. Original Amount of Debt: <u>\$ 100.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>100.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Owed to or by: <u>SAME AS ABOVE</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>6-10-12</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				<u>1,400</u>
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				<u>—</u>

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name \_\_\_\_\_

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>PATRICK O. DUGGAN</u> <u>310 LINCOLN DR.</u> <u>BAY CITY, MI 48706</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>6-14-12</u> 6. Original Amount of Debt: <u>\$ 325.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>325.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>SAME AS ABOVE</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>6-20-12</u> 6. Original Amount of Debt: <u>\$ 300.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>300.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>SAME AS ABOVE</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>7-18-12</u> 6. Original Amount of Debt: <u>\$ 1,111.04</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>1,111.04</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

1,736.04

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

3,136.04

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name PATRICK D. DUGGAN FOR PROSECUTOR

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>6-13-12</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>62</u>	5. Type of Fund Raising Activity <u>DRINKS &amp; HORS D'OEUVRES RECEPTION</u>	6. Address and Name (if any) of the place where the activity was held. <u>DIAMOND BALLROOM</u> <u>605 E. MIDLAND</u> <input type="checkbox"/> <u>BAY CITY, MI 48706</u> <small>Private Residence</small>
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7. Total Contributions 3,620.00  
8. Other Receipts - 0 -  
9. Gross Receipts (Add lines 7 and 8) 3,620.00  
10. Total Cost of Event 1,109.17  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150459  
2. Committee Name PATRICK O. DUGGAN FOR PROSECUTOR

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>July 18, 2012</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>310</u>	5. Type of Fund Raising Activity <u>FAMILY BUFFET</u>	6. Address and Name (If any) of the place where the activity was held. <u>UAW 362 HALL</u> <u>4427 E. WILDER RD</u> <input type="checkbox"/> <u>BAY CITY, MI 48706</u> <small>Private Residence</small>
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7. Total Contributions \$ 8,734.00  
8. Other Receipts - 0 -  
9. Gross Receipts (Add lines 7 and 8) 8,734.00  
10. Total Cost of Event 2,015.36  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

[www.Michigan.gov/sos](http://www.Michigan.gov/sos)

LATE CONTRIBUTION REPORT

1. Your Committee ID#: 150459
2. Your Committee Name: PATRICK D. DUGGAN FOR PROSECUTOR
3. Date Late Contribution(s) Received: 7-28-12 (Only one Date per Sheet)

- Late Contribution Reports are required when a
  - Candidate committee receives a single contribution or a cumulative contribution from the same contributor of \$500.00 or more after the closing date of the last campaign statement required and the 3<sup>rd</sup> day before an election where the candidate is participating. See Appendix G of the Campaign Finance Manual.
  - A committee other than a candidate committee (PAC, Ballot Question or Political Party) receives a single contribution or a cumulative contribution from the same contributor of \$2,500.00 or more after the closing date of the last campaign statement required and the 3<sup>rd</sup> day before an election. See Appendix G of the Campaign Finance Manual.
- Contributions are anything of monetary value including contributions of money, in-kind and loans to the committee.
- Late Contribution Reports are not waived by the Reporting Waiver.
- Late Contribution Reports that are filed late result in the committee receiving a late filing fee. The maximum fee is \$2,000.00 per report.
- Paper filers may file the report by any written means (including fax) within 48 hour of receipt of the contribution with your Filing Official.
- Electronic Filers on the state level must file all Late Contribution Report electronically.
- The Late Contribution must also be reported on the next Campaign Statement owed by the committee.

4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor.	5. Amount
Contributor Name and Address: <u>J. W. JOAKE</u> <u>6331 HEATHER RIDGE</u> <u>BAY CITY, MI 48706</u> (If Individual, also provide:) Occupation <u>Retired</u> Employer / Business Address <u>NOT APPLICABLE</u>	<u>1,000.00</u>
Contributor Name and Address:  (If Individual, also provide:) Occupation _____ Employer / Business Address _____	
Contributor Name and Address:  (If Individual, also provide:) Occupation _____ Employer / Business Address _____	
Contributor Name and Address:  (If Individual, also provide:) Occupation _____ Employer / Business Address _____	

EX-111  
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JUL 30 2012